FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthem • Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P95000046752 (8)

Principal Place of Business Mailing Address 7178 SEMINOLE BLVD. SEMINOLE FL 34642 7178 SEMINOLE FL 34642 7178 SEMINOLE FL 34642							
					3. Date Incorporated or Qualified 06/12/1995	3a. Date of La	nst Report
2. Principal Place of Business 2a. Mailing Address 21				4. FEI Number		Applied For	
26 Suite, Apt. #, etc. Suite, Apt. #, etc.				59-3324540		Not Applicable	
27				5. Certificate of Status Desired		1.75 Additional Fee Required	
		City & State			6. Election Campalgn Financing		5.00 May Be
		T 65	···	Trust Fund Contribution		idded to Fees	
24	25	29 30		ıry	8. This corporation has liability for intangible tax under s 199.032. Florida Statutes ▼ Yes No		
	9. Name and Address of Curre				10. Name and Address of New F		 t
010011	INC. BANKALALA		1	31 Name			
O'CONNOR, PATRICK M ESQ. C/O PATEL, MOORE & O'CONNOR, P.A. 18167 U.S. HIGHWAY 19 NORTH, SUITE 150 CLEARWATER FL 34624			1	32 Street Ad	ress (P.O. Box Number is Not Acceptable)		
				33			
			[3			
			į e	34 C1y		FL 85	Zip Code
SIGNATURE.	Signature, typed or princed name of registered age	nt and tite if applicable.	(NOTE: Bugistered A			DAYE	
12. Title	OFFICERS AF	ND DIRECTORS	13.	·	ADDITIONS/CHANGES TO OFF	CERS AND DIRE	CTORS IN 12
NAME	GOLDSTEIN, ROBERT J	F") Detrit	1. 1 TITE 1.2 NAM		•	Chai	nge [] Addition
STREET ADDRESS	3434 ACM 104 A TO THE TOTAL TOT			ET ADDRESS			
C-TY-ST-ZIP	SEMINOLE FL 34642			-SI-ZIF			
TITLE		[] DELETE 2.		t l	☐ Change ☐ Add		nge Addition
NAME TO STATE OF THE STATE OF T			2.2 NAM	F			
STREET ADDRESS CITY+ST-7IP				ET ADDRESS			
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NAME		Grad	3 2 NAM			Char	ige [] Addition
STREET ADDRESS			3.3. STRE	ET ADDRESS			
CHY-S1-7/P		Fig res	3.4 CITY				
TITLE NAME		[]] DEFE LE	4.1100			Char	ge 🔲 Addition
STREET ADDRESS			4.2 NAM	ET ADDRESS			
C-TY - ST - ZIP			4.3 STRE				
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NAME			5.2 NAME				
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CITY-ST-769 TITLE	to the second control of the second control	[] DELETE	5.4 Cilly -		4 16. 16		PAG
NAME		L.J DECETE	6 1 TITLE 6 2 NAME		60000179		ge [_] Addition
STREET ADDRESS							
attrici Applitas			•		-04/16/96011	31014	
ITY-ST-ZIP			•	TADDRESS	6000017 6 -04/16/96011 ***200.00	31014	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not quality for the exemption stated in Section 119.07(3)(k), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if planaged, or on an attachment with an address.

SIGNATURE:

Robert J. Goldstein

4/1/96 (813) 393-4377